

FORM PTO-1449
(REV. 7-85)

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

INFORMATION DISCLOSURE CITATION

(Use several sheets if necessary)

JCO6 Rec'd PCT/PTO 19 MAY 2005

Sheet 1 of 1

ATTY. DOCKET
70176
APPLICATION NO.
TO BE ASSIGNED
APPLICANT
KOTZIAN, GEORG
FILING DATE
HEREWITH

10/535685

Group

U.S. PATENT DOCUMENTS

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE
/D.S./	AA	5,447,903	9/5/95	OSWALD, ET AL.			
	AB						
	AC						
	AD						

FOREIGN PATENT DOCUMENTS

		DOCUMENT NUMBER	DATE	OFFICE	CLASS	SUBCLASS	TRANSLATION	
							YES	NO
/D.S./	AE	0005956	2/10/00	WO			<input type="checkbox"/>	<input type="checkbox"/>
/D.S./	AF	09030904	2/4/97	JP			<input type="checkbox"/>	<input type="checkbox"/>
/D.S./	AG	02085118	10/31/02	WO			<input type="checkbox"/>	<input type="checkbox"/>
/D.S./	AH	03024224	3/27/03	WO			<input type="checkbox"/>	<input type="checkbox"/>

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent pages, Etc.)

	AI	
	AJ	
	AK	
	AL	
	AM	
	AN	
	AO	
	AP	

EXAMINER

/Danielle Sullivan/

DATE CONSIDERED

09/27/2007

*EXAMINER: Initial of reference considered, whether or not citation is in conformance with MPEP 609: Draw a line through citation if not in conformance and not considered. Include a copy of this form with the next communication to applicant.

INFORMATION DISCLOSURE CITATION

(Use several sheets if necessary)

ATTY. DOCKET
70176
APPLICATION NO.
10/535,685
APPLICANT
Kotzian, Georg R.
FILING DATE
May 19, 2005

Group

U.S. PATENT DOCUMENTS

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE
/D.S./	AA	5,635,450	6/3/97	Mayer, et al.			
	AB						
	AC						
	AD						
	AE						
	AF						

FOREIGN PATENT DOCUMENTS

		DOCUMENT NUMBER	DATE	OFFICE	CLASS	SUBCLASS	TRANSLATION	
							YES	NO
/D.S./	AG	00/52006	9/8/00	WO			<input type="checkbox"/>	<input type="checkbox"/>
/D.S./	AH	02/30921	4/18/02	WO			<input type="checkbox"/>	<input type="checkbox"/>
/D.S./	AI	94/08999	4/28/94	WO			<input type="checkbox"/>	<input type="checkbox"/>
	AJ						<input type="checkbox"/>	<input type="checkbox"/>
	AK						<input type="checkbox"/>	<input type="checkbox"/>
	AL						<input type="checkbox"/>	<input type="checkbox"/>
	AM						<input type="checkbox"/>	<input type="checkbox"/>
	AN						<input type="checkbox"/>	<input type="checkbox"/>
	AO						<input type="checkbox"/>	<input type="checkbox"/>

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent pages, Etc.)

	AP	
	AQ	
	AR	

EXAMINER

/Danielle Sullivan/

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